

STATE OF WISCONSIN, CIRCUIT COURT, _____ COUNTY

For Official Use

IN THE MATTER OF

☐ Amended

**Letters of
Temporary Guardianship
of the Person**

Case No. _____

Date of Birth _____

To:

You have been appointed temporary guardian of the person of the above named individual.

You are issued Letters of Temporary Guardianship of the Person with the following powers: ☐ **See attached**

- ☐ Co-Guardians must agree when making decisions on behalf of the ward unless otherwise ordered by the court
☐ as follows: _____.
- ☐ These Letters of Temporary Guardianship of the Person expire at the end of **60 days** on: _____
(unless further **extended for an additional 60 days** by an order of this court)
- ☐ These Letters of Temporary Guardianship of the Person continue in effect for a period up to **30 days** pending the hearing for a permanent guardianship.

BY THE COURT:

Circuit Court Judge/Court Commissioner

Name Printed or Typed

Date

☐ Letters of Temporary Guardianship of the person **are extended for an additional 60 days** to _____.

BY THE COURT:

Circuit Court Judge/Court Commissioner

Name Printed or Typed

Date

Name of Attorney	
Address	
Telephone Number	Bar Number